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CONFIRMATION NO. 3283

<b>SERIAL NUMBER</b> 10/749,123	<b>FILING OR 371(c) DATE</b> 12/30/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1618	<b>ATTORNEY DOCKET NO.</b> 110129.432
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/440,924 01/17/2003 and claims benefit of 60/437,384 12/30/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None -*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 04/29/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 240	<b>INDEPENDENT CLAIMS</b> 12
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Ragadeleventu</i> <i>STR</i> Examiner's Signature Initials				

**ADDRESS**  
41551

**TITLE**  
Tissue reactive compounds and compositions and uses thereof

<b>FILING FEE RECEIVED</b> 3052	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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